

AMENDMENT TRANSMITTAL LETTER			Docket No. 0171-1248PUS1	
Application No. 10/559,999-Conf. #4595	Filing Date December 9, 2005	Examiner J. L. Stanley	Art Unit 1796	

Applicant(s): Kensuke ITAKURA et al.

Invention: POWDERS, FLAKES, OR PELLETS CONTAINING SALTS OF α -SULFO FATTY ACID ALKYL ESTERS IN HIGH CONCENTRATIONS, PROCESS FOR PRODUCTION THEREOF, GRANULATED DETERGENTS, AND PROCESS FOR PRODUCTION THEREOF

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Transmitted herewith is an amendment in the above-identified application.
The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	19	- 20 =	0	x 50.00	0.00
Independent Claims	5	- 3 =	2	x 210.00	420.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					420.00

☒ Large Entity
☐ Small Entity

☐ No additional fee is required for this amendment.

☒ Please charge Deposit Account No. 02-2448 in the amount of \$ 420.00.
A duplicate copy of this sheet is enclosed.

☐ A check in the amount of \$ _____ is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. 02-2448 as described below. A duplicate copy of this sheet is enclosed.

☒ Credit any overpayment.

☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

R.C. Stewart #21,066
Gerald M. Murphy, Jr.
Attorney Reg. No.: 28,977

Dated: September 25, 2008

BIRCH, STEWART, KOLASCH & BIRCH, LLP
8110 Gatehouse Road
Suite 100 East
P.O. Box 747
Falls Church, Virginia 22040-0747
(703) 205-8000

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2008</h3>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	
		10/559,999-Conf. #4595	
		Filing Date	
		December 9, 2005	
		First Named Inventor	
		Kensuke ITAKURA	
		Examiner Name	
		J. L. Stanley	
		Art Unit	
		1796	
TOTAL AMOUNT OF PAYMENT		(\$)	420.00
		Attorney Docket No.	
		0171-1248PUS1	

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description						Small Entity Fee (\$)	Fee Paid (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						210	105
Multiple dependent claims						370	185
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
19 - 20 = 0		x	50.00	=	0.00		
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
5 - 3 = 2		x	210.00	=	420.00		
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
_____ - 100 = _____	/50 = _____	(round up to a whole number) x _____	=				
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$)	
Other (e.g., late filing surcharge): _____							
SUBMITTED BY							
Signature	<u>R. C. Stewart #21,066</u>		Registration No. (Attorney/Agent)	28,977	Telephone	(703) 205-8000	
Name (Print/Type)	Gerald M. Murphy, Jr.			Date	September 25, 2008		